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| Renal Directorate Guidelines  Royal Infirmary of Edinburgh |

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| |  |  | | --- | --- | | **Indication** | * Empirical antibiotic (with vancomycin) for line sepsis (review ongoing need when culture results are available) * All other indications as per NHS Lothian Antimicrobial guideline | | **Dosage and administration** | **\*\* Do NOT use Gentamicin Calculator on the Intranet \*\***  Dose – 2mg/kg (up to a maximum of 180mg).   * Please use **dry weight**. This is particularly important in patients with oedema. * Where possible, please administer via dialysis access at the end of dialysis. | | **Concentration** | 80mg/2ml or diluted for infusion | | **Stability** | Please use reconstituted solution as soon as possible. | | **Reconstitution instructions** | **IV injection - to be administered over 5 minutes**  Can be given undiluted (40mg/ml) or diluted in 10-20ml of 0.9% NaCl or 5% Dextrose to aid slow bolus injection.  **IV infusion - to be infused over 20 minutes**  Dilute in 100ml of 0.9% NaCl or 5% Dextrose | | **Monitoring** | For new patients starting on gentamicin, a pre-dialysis level is not required prior to the first dose.  **INPATIENTS:**   * **Dialysis days:**  Take a level pre-dialysis. Dose if level is **<3mg/L.** * **Non-dialysis days:** Please take a level before the expected dosing time. Dose to be administered if level is **<2mg/L.**   **OUTPATIENTS:**   * Take a level pre-dialysis. Dose if level is **<3mg/L.** | | **Additional information** | Gentamicin is removed via haemodiafiltration and haemodialysis. Therefore, the dose must be given at the end of a dialysis session. |     **Gentamicin For Patients Who Receive Haemodialysis** |  |